

Application Data Sheet

Application Information

Filing Date::	03/01/2004
Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	None
CD-ROM or CD-R?::	None
Title::	VASO-OCCLUSIVE COILS WITH NON-OVERLAPPING SECTIONS
Attorney Docket Number::	30-7034852001 (03-277)
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figures::	9
Total Drawing Sheets::	5
Small Entity::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Clifford

Family Name::	Teoh
City of Residence::	Los Altos
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	123 Juarez Avenue
City of mailing address::	Los Altos
Country of mailing address::	US
State or Province of mailing address::	CA
Postal or Zip Code of mailing address::	94538
Applicant Authority type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Michael P.
Family Name::	Wallace
City of Residence::	Fremont
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	43389 Jerome Avenue
City of mailing address::	Fremont
Country of mailing address::	US
State or Province of mailing address::	CA
Postal or Zip Code of mailing address::	94539

Correspondence Information

Name:: Bingham McCuthen, LLP
Street of mailing address:: Three Embarcadero, Suite 1800
City of mailing address:: San Francisco
Country of mailing address:: US
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94111-4067
Telephone:: (650) 849-4400
Fax:: (650) 849-4800

Representative Information

Representative Customer Number:: 23639

Representative Designation::	Registration Number::	Name::
Primary	37,104	David T. Burse

Assignee Information

Name:: Scimed Life Systems, Inc.
Mailing address:: One Scimed Place, Maple Grove, MN 55311